PTO/SB/17 (10-08)
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/776,503-Conf. #3677 **FEE TRANSMITTAL** February 12, 2004 Filing Date Masato NAITO First Named Inventor For FY 2009 F. M. Leiva Examiner Name Applicant claims small entity status. See 37 CFR 1.27 3714 Art Unit TOTAL AMOUNT OF PAYMENT (\$) 810.00 2927-0167P Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify) x Deposit Account Deposit Account Number. 02-2448 Deposit Account Name Birch, Stewart, Kolasch & Birch, LLP

For the above-ident	itied deposit	account, the D	rector is ne	ereby authorize	a to: (cneck	all that apply)			
x Charge fee(s) indicated below				Charge fee(s) indicated below, except for the filing fee					
Charge any ac fee(s) under 3		(s) or underpay and 1.17	ments of	x Credit	any overpay	ments			
FEE CALCULATION									
1. BASIC FILING, SEARCH									
	FILING FEES SEAR Small Entity		CH FEES EXAMINATION Small Entity Sm		Small Entity				
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$) Fee (\$)		Fees Pald (\$)		
Utility	330	165	540	270	220	110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES								Small Entity	
Fee Description							Fee (\$)	Fee (\$)	
Each claim over 20 (include							52	26	
Each independent claim over	er 3 (includ	ing Reissues)					220	110	
Multiple dependent claims							390	195	
		Fee (\$)	Fee Paid (\$)		Multiple Depende				
15 - 20 or HP		× =			Fee	(\$)	Fee Paid (	5)	
HP = highest number of total clai			_						
	ra Claims	Fee (\$)	Fee	Paid (\$)					
1 - 3 or HP = HP = highest number of indepen			n 3.						
3. APPLICATION SIZE FEE									
If the specification and dra listings under 37 CFR sheets or fraction there	awings exce 1.52(e)), the	application size	e fee due i	is \$270 (\$135 t	onically file or small ent	d sequence or ity) for each a	computer additional 5	50	
	xtra Sheets			litional 50 or fra	tion thereof	Fee (\$)	Fee	Paid (\$)	

Other (e.g.,	810 00				
SUBMITTED BY	Rederick K	Havel (Registration No.	32.868	Telephone	(703) 205-8000
Name (Print/Type	Andrew D. Meikle	77 (Lafforney/Agent)	32,000	Date	March 11, 2009

- 100 = \_\_\_\_\_ /50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_ =

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

4. OTHER FEE(S)